

Susan Cumbia Clare, M.Ed. Executive Director

## OFFICE OF COMPREHENSIVE SERVICES

Administering the Comprehensive Services Act for At-Risk Youth and Families

March 12, 2015

Alan Wooten, CPMT Chair Greater Prince William CSB 8033 Ashton Ave, Ste #103 Manassas, VA 20109

Dear Mr. Wooten,

following:

In accordance with the Office of Comprehensive Service's (OCS) Audit Plan for Fiscal Years 2013-2015, the Prince William County Community Policy and Management Team (CPMT) has completed and submitted the results of the self assessment audit of your local CSA Program by the established due date of March 31, 2014. At the direction of the Executive Director of OCS, the scope of the independent validation was expanded to examine areas brought to the attention of OCS regarding potential non-compliance with fiscal and program policies, procedures and statutes of CSA. The expanded scope test work included:

- 1. examination of the Pool Fund Reimbursement reporting procedures; and
- 2. examination of residential placement case records.

An on-site visit was scheduled and conducted by OCS Program Auditors on May 20-22, 2014 to perform the independent validation and to complete the expanded scope procedures. As a result of the initial audit observations concluded during the on-site visit, expanded fieldwork was conducted through March 11, 2015 with the assistance of the Prince William County CSA office.

Based on the review and examination of the self assessment workbook and supporting documentation provided by the Prince William County At-Risk Youth and Families Services program, our independent validation:

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Concurs	Partially Concurs	□ Does Not Concur
significant observations	orted by the Prince William County CPMT. of non-compliance and/or weakness found ble to the processes or services conducted or	in the design or operation of the
	ily Services Office CSA. The explanation	

The Prince William County CPMT concluded that there were only non-significant compliance and/or internal control weakness observations noted. However, validation procedures of the locally prepared CSA Self-Assessment Workbook indicated that there were significant internal control and significant non-compliance weaknesses in the local CSA program. An adequate system of internal controls is contingent upon appropriate segregation of duties, proper reviews and authorization, and clear lines of authority/responsibility governing operational and fiscal activities. Lack of segregation of duties, appropriate reviews/authorizations, and blurred lines of authority/responsibility are considered significant. In addition, non-compliance with the statutory requirements of the Comprehensive Services Act (CSA) is considered significant because the local program is not fully operating in accordance with the laws of the Commonwealth. Specifics are detailed below.

## SIGNIFICANT INTERNAL CONTROL WEAKNESSES AND NON-COMPLAINCE OBSERVATIONS

- Internal controls established by CSA statutes were not effectively implemented by the CPMT in order to safeguard against improper separation of duties pertaining to the referral of services and approval of access to CSA pool funds by eligible youth and their families. Prince William CPMT policy allows their Family Assessment and Planning Teams (FAPT) to approve funding for recommended services, which conflicts with the Code of Virginia §2.2-5206.9 that states the CPMT is responsible for the authorization and monitoring of expenditures recommended by FAPT and/or Multi-Disciplinary Team (MDT). Having the same body recommend services and approve funding creates a material internal control weakness. While the CPMT receives a summary report on FAPT expenditures it is after services have commenced.
- Section VI of Prince William County Policies Manual for At-Risk Youth and Families Services provides for blanket authorization of funding for foster care and other services not considered maintenance, which are not presented to FAPT for service planning. Such services are as follows: non-Medicaid reimbursable transportation, educational expenses not to exceed \$500 per year and cumulative monthly cost not to exceed \$1,000. Through further inquiry of CSA staff, it was brought to the auditor's attention that funding for Kinship Care, parent education through Virginia Cooperative Extension and Juvenile Pretrial Supervision Program are services provided outside of the FAPT process as well. The application of this local policy circumvents State CSA statute which only permits foster care maintenance expenses and/or IEP approved services to be exempt from FAPT. Educational expenses, cumulative monthly cost not to exceed \$1,000, kinship care, parent education through Virginia Cooperative Extension and Juvenile Pretrial Supervision services are not considered foster care maintenance and must be presented to FAPT as required by Code of Virginia § 2.2-5209.
- Conflict of interest statements were not maintained to evidence completion by the parent representative and private providers serving on CPMT and FAPT. COV § 2.2-5205, Paragraph 4. Prince William County CPMT acknowledged this non-compliance and has submitted a corrective action plan to address this weakness; however, the decision to use March of every year to monitor compliance with the requirement for timely submission does not coincide with the statutory requirement that the Statement of Economic Interest Form must be filed every January 15<sup>th</sup> of each year. Effective July 1, 2014, filing requirements of Virginia Conflict of Interest Act were revised. Specifics of the changes are noted in Code of Virginia 2.2-3115.

# SIGNIFICANT INTERNAL CONTROL WEAKNESSES AND NON-COMPLAINCE OBSERVATIONS

- The local management structure of Prince William County (PWC) At-Risk Youth and Families Services Program does not have the required membership (missing parent representative) on its three FAPT established by CSA statute. PWC CPMT acknowledged the non-compliance weaknesses; however, they did not recognize it as a significant non compliance weakness. Prince William County CPMT has submitted an acceptable corrective action plan to address this non-compliance matter.
- The Prince William County CPMT has not established an ICC policy in accordance with the requirements of the COV § 2.2 5206, item 17, which directs CPMT to establish policies for providing ICC services for children who are at risk of entering, or are placed in, residential care through the Comprehensive Services Act. The corrective action submitted by Prince William CPMT did not adequately address this non-compliance issue. Currently, the established local policies are not consistent with CSA guidelines in that the CSB only provides ICC services for specific CSU cases, which are not referred by FAPT. Prince William County At Risk Youth and Families Services does not fund for ICC services for youth served under CSA.
- All information pertaining to specific children and families obtained by the team members (FAPT and CPMT) shall be regarded as confidential as stated in COV 2.2-5210. Prince William County acknowledges that they are not maintaining confidential statements of their parent representatives serving on their CPMT and FAPT teams. PWC states that confidentiality requirements are a function of employment for county employees and are a licensing requirement with their private providers.

  Attendees to CPMT and FAPT meetings are reminded of the requirement for confidentiality when cases are presented; however, written documentation is not maintained. To evidence compliance with COV, PWC CPMT may want to consider adding a section to their IFSP where members can sign acknowledging the confidentiality requirement. In addition, the CPMT members can sign a confidentially statement annually to demonstrate their compliance.
- Information and data security practices and procedures pertaining to CSA client records and data have not been consistently applied to ensure that sensitive and confidential information maintained is adequately secured from unauthorized access and/or alteration. Child Adolescent Needs Virginia System (CANVaS) access had not been deactivated for two case managers when changes in the employees' job responsibilities and/or separation from the agency had occurred. Failure to properly and timely terminate inactive user accounts could potentially jeopardize the confidentiality of the information that has been entered. Per the policies and procedures for access to CANVaS when an employee leaves his/her position, supervisors must contact the Help Desk to deactivate a user's account.

In addition, two other case managers were identified to have expired Child Adolescent Needs Strengths (CANS) certification. The policies and procedures for access to CANVaS states that certification on the use of CANS must be renewed annually. The CANVaS system is designed so that users whose CANS certification has expired will not be permitted to complete an assessment. In addition, the system provides users with 90, 60 and 30 day notification prior to the expiration of users' certification.

Written policies and procedures are not reviewed and updated on a set schedule and they are not provided to all community stakeholders. Prince William County has submitted an acceptable corrective action plan to address this matter; however, the CPMT did not view this as a significant internal control weakness. Review of policies and procedures manual annually ensures the manual is current and comply with new statutory requirements and it reflects the actual practices of an organization. In addition, the policy manual should be accessible to all stakeholders to avoid misapplication of the policies and procedures.

#### RECOMMENDATIONS:

- Prince William County CPMT should revised current policies to ensure they align with CSA statutes and policies established by the Code of Virginia and policies of the State Executive Council.
- In addition, the CPMT should identify funds expended outside of the FAPT process. Upon completion of the review, the CPMT should report results to the Office of Comprehensive Services for determination of the extent of non compliant practices and identification of expenditures that could be subject to denial of funds policy in accordance with COV §2.2-2648(D) (20).
- The CPMT may want to consider adding a confidentiality section to their IFSP where FAPT members can sign acknowledging the confidentiality requirement. In addition, the CPMT members can sign a confidentially statement annually to demonstrate their compliance.
- Prince William County CPMT should designate someone to periodically review individuals with access to CANVaS and ensure security requirements are met, active and inactive users are identified, and accounts are removed in a timely manner. Moreover, the CSA Coordinator or designee should monitor CANS certification to ensure case managers are current using the Locality Staff Certification Expiration List Report in the CANVaS system.

<u>Client Comments:</u> CPMT and DSS Management appreciate all observations and accept all recommendations.

- "1. Utilization Management Coordinators, designated by the CPMT, have the authority to approve funding for service plans finalized by FAPTs. The approval from OCS Auditors for the new process is appreciated. CPMT approved the final procedural steps on December 17, 2014.
- 2. The UM Coordinator for nonresidential services will conduct reviews of each case to determine compliance with CSA eligibility criteria and have applicable cases presented to the next available FAPT for review and finalization of services plans. CPMT approved these procedural steps on December 17, 2014.
- 3. A master list was created of private provider and parent rep members who are required to have conflict of interest statement forms on file along with the completion status, i.e., date of most recent form on file or status to collect the applicable form. Every November, members will be reminded to update/complete their forms before the December holiday break. Status will be reviewed and documented by mid-December.

- 4. This issue was identified prior to the audit and a corrective plan was put into effect, which was determined acceptable by OCS Auditor which is appreciated.
- 5. The CPMT decided to purchase ICC services from approved ICC providers, as needed. Final procedural steps were approved by CPMT on December 17, 2014.
- 6. The issue was identified prior to the preliminary report and a corrective plan was put into effect, which was determined acceptable by the OCS Auditor. This acceptance is appreciated.
- 7. The UM Coordinator for residential services is assigned responsibility to oversee training and certification of case workers to ensure security requirements are routinely met and reviewed monthly.
- 8. This issue was identified prior to the preliminary report and a corrective plan was put into effect, which was determined acceptable by the OCS Auditor. This acceptance is appreciated."

**Auditor Note:** The Office of Comprehensive Services does not approval local policies. The auditor advised the CSA Coordinator that the proposed action to have the UM Coordinators approve funding on behalf of the CPMT was a viable solution to address the internal control weakness. The auditor however pointed out other possible internal control weaknesses with the proposed action for the CPMT to consider.

As mentioned on the first page of the report, the scope of the independent validation was expanded to include an examination of pool fund reimbursement reporting procedures and residential placement case records. The remainder of this report will address the observations identified based on our review of the pool fund reporting and residential case reviews.

## POOL FUND REIMBURSEMENT REPORTING

- The auditor requested three years (FY 11- FY 13) of detailed transactions that makes up the pool fund reimbursement report completed by Prince William County At-Risk Youth and Families Services program. The auditor noted the following errors in reporting:
  - 1. Prior year expenditures reported in the current year,
  - 2. Prior year expenditures reported after the September 30 deadline that are not eligible for reimbursement, and
  - 3. Reporting expenditures based on anticipated expenditures and/or encumbrances at year end.

Comprehensive Services Act is a reimbursement program; therefore, local programs submit pool fund reports based on actual expenditures (cash out flows) incurred during the reporting period. Prince William County At Risk Youth and Families Services program's practice is to record an accounts payable accrual entry at year end based upon open encumbrances and reverses the entry next fiscal year. This was done because the locality is on a modified accrual basis of accounting which recognizes transactions when they occur rather than when cash is paid out. This practice is not consistent, however with the certification on each submitted pool fund reimbursement report that "the expenditures and refunds reported herein were incurred in accordance with provisions of the Comprehensive Services Act,

and have not been reported on a previous claim. Documentation is maintained to support the expenditure and refund amounts reported, and to demonstrate that each expenditure and refund was made on behalf of a specific child (or list of specific children) and complies with the CSA Manual, COV and Appropriation Act requirements including utilization management and FAPT criteria." In addition, after June 30<sup>th</sup>, localities are afforded the opportunity to report prior year expenditures in the pool fund reimbursement reports until September 30<sup>th</sup> to ensure all program expenditures are captured in the correct program year. Localities may submit up to five June 30<sup>th</sup> pool fund reports. The table below displays the amounts of the reporting errors.

#### POOL FUND REIMBURSEMENT REPORTING

<ul><li>Exhibit</li></ul>	t A
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Reporting Errors	FY 111	FY 12	FY 13	Total
Prior year expenditures reported in		·		
current yr	\$901,468.19	\$930,177.65	\$603,415.15	\$2,435,060.99
Prior year expenditures claimed after the			9	
September 30 deadline *	\$1,216.04	\$33,597.63	\$8,695.50	\$43,509.17
Anticipated Expenditures (accrual entry				
booked)	\$925,035.03	\$1,003,212	\$1,882,434	\$3,810,681.03

\* These expenditures are included in the total prior year expenditures reported in the current fiscal year.

The above reporting errors affect the accurate reporting of expenditures for each fiscal year; therefore, Prince William County finance department could not attest to the actual total of expenditures by fiscal year.

RECOMMENDATION: Prince William County Finance Department stated it will discontinue booking an accrual entry at year end for CSA purposes starting in FY 14. Prince William County CPMT should ensure that program expenditures are reported in the correct fiscal year and not request reimbursement of prior fiscal year expenditures recorded after the September 30<sup>th</sup> deadline. In those instances, local only funds should be used. The CPMT should consult with OCS on the appropriate action to be taken where CSA pool funds were not appropriately expended in accordance with COV §2.22648(D)(20) denial of funds policy.

<u>Client Comments:</u> "CPMT and DSS management appreciate the observation and accept the recommendation.

PWC Finance Department staff reviewed the Exhibit (A) provided by the State Comprehensive Services Officer Observer and could not attest to the actual total of expenditures by fiscal year. The accrual accounting process was replaced with a cash basis to align with the state's method. PWC Finance, PWC Budget and DSS Finance staff worked together to develop a more comprehensive system for detailing transactions and monitoring the pooled fund usage. CPMT will submit an appropriate action policy for use when and if CSA pool funds are not appropriately expended."

#### RESIDENTIAL CASE REVIEW

In January 2014, the Prince William At-Risk Youth and Family Services Office sent a memorandum to its private providers titled "Reduction in Out-of –Home Placements", stating the following: "due to financial shortfalls with state reimbursement, Prince Williams County will need to reduce its out-of-home placement by more than 50%." The memo states that Prince William County had 54 youth in

residential placement and they needed to reduce this number to 30 placements or less to ensure they remain within their FY 14 budget. The memo further states that FAPTs, public agencies and case workers would begin work immediately to develop discharge plans to transition youth back to the community by February 28, 2014.

Prince William County At-Risk Youth and Family Services Office reported to the County Board of Supervisors and community stakeholders that the local match for Medicaid services created a shortfall in state reimbursement to its CSA program of approximately \$600,000. However, there has not been a change in the Medicaid reimbursable rate since 2011. The lack of funding however was due to Prince William County not sufficiently budgeting for the local match for Medicaid approved residential services.

Per review of CPMT board minutes and/or administrative team minutes Prince William has had on average 54 children in residential placement and an average of 21 cases with residential placement greater than 1 year. Assuming the cost of room and board for a residential treatment facility located in Northern Virginia is \$141.77 per day multiplied by 365 days/year times 21 (cases in residential placement for greater than a year), the estimated cost of providing these services is \$1,086,667.05.

In addition, on average, Prince William County has 5 cases costing the locality more than \$10 thousand a month which equates to more than \$600,000 per year (5 cases \*\$10,000\*12 months). In May 2013, the At-Risk Youth and Family Services Office had 22 cases in residential placement with no discharge planning in place. (It is to be noted that by February 2014, all residential cases had discharge plans in place).

## RESIDENTIAL CASE REVIEW

- Prince Williams County policy manual for At-Risk Youth and Family Services states that, for cases deemed appropriate for residential services, the case manager and the FAPT will implement a pre and post discharge plan to ensure children can return to a less restrictive environment as soon as possible. Timeline tasks were established to facilitate the process, with actions occurring within 30, 45, and 90 days of the placemen as follows:
  - 30 Days: Case manager conducts case review to assess progress toward accomplishing stated outcomes and discharge plans; coordinates with facility, treatment team, clients, and families.
  - 45 Days: The case manager is required to inform the utilization manager (UM) coordinator on the status of all cases (within 45 days after initial placement and within 45 days after each FAPT approved continuation of residential services).
  - 90 Days: case manger convenes an assessment meeting to define treatment needs, determine a revised discharge date, and decide if additional community bases services are needed to return the child to a less restrictive environment.

The table below depicts the status of Prince Williams County residential cases for a twelve month period.

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Month	# of Residential Cases	# of cases in Residential > than 1 yr	# of cases costing \$10k or greater per month	# of Residential Cases w/o discharge plans
March 2013	57	26	6	Not reported
April 2013	56	25	6	Not reported
May 2013**	57	20	4	22
June 2013	67	25	6	20
July 2013	Not reported in Admin Minutes	Not reported in Admin Minutes	Not reported in Admin Minutes	Not reported in Admin Minutes
Aug 2013	No Meetings	No Meetings	No Meetings	No Meetings
September 2013**	54	22	6	10
October 2013	52	21	3	4
November 2013	61	19	6	4
December 2013	56	17	5	0
January 2014	54	14	4	0
February 2014	40	16	2	0
Average	54	21	5	8
	om the Admin Meetin	1	10	

#### **RECOMMEDATIONS:**

- The CPMT should continue enforcing their current Utilization Review process to ensure that discharge planning begins with the initial service plan and that the case managers are monitoring the cases monthly and reporting progress to the FAPT and UM Coordinator.
- In addition, the CPMT should re-evaluate its decision regarding ICC services being limited to court service cases and expanding it to all residential cases in accordance with statute as this may decrease the length of time in residential placement, thus containing residential costs for the locality.

<u>Client Comments: "CPMT and DSS management appreciate the observations and accept the recommendations.</u>

The CPMT and DSS management profoundly regret the memorandum sent the week of January 20, 2014. The wording was in error and miscommunicated the intent of CPMT, which was to assess all residential cases to project estimated expenditures for the remaining fiscal year. The CPMT was attempting to fulfill its responsibility to monitor and authorize expenditures in order to not exceed FY2014 budgeted expenditure authority. It was never the intention of the CPMT to violate the FAPT process with respect to treatment and discharge planning. Unfortunately, the communication from and between CPMT and DSS staff was not clear, which created misunderstanding and confusion among staff, case managers, providers, and, ultimately, families. A corrective correspondence was delivered to providers on January 28, 2014. PWC Finance, PWC Budget and DSS Finance staff worked together to develop a more comprehensive system for detailing transactions and monitoring the Medicaid reimbursement. The data reviewed during the audit contained Exhibit B regarding residential cases which showed that the problem was identified, addressed and rectified as of December 2013. Discharge planning has been corrected. Department directors review residential requests to confirm all community-based options have been considered, which include discharge information, prior to their case manager going to FAPT."

## **RESIDENTIAL CASE REVIEW**

The Code of Virginia § 2.2-5211c State pool of funds for community policy and management teams, requires localities to set aside appropriate and sufficient funding to serve children in the mandated population as defined in subsection B of the above stated code. If the allocated portion of the state pool funds is insufficient to meet the needs of the mandated population being served, supplemental funds are available from the state upon the request of the CPMT.

OCS Program Auditor reviewed 7 residential cases and found 3 out of 7 cases (43%) where FAPT made decisions to change service plans based on the CPMT's directive to reduce residential placements due to financial constraints. Based upon the review of case files, client and provider's complaints, and other information gathered, it appears that Prince William County FAPTs made decisions based on the CPMT directive and not based on the needs of the families and children being served as mandated in the Code of Virginia § 2.2-5208 Family assessment and planning team; powers and duties. This is evidenced by appeal decisions; service provider commitment to absorb costs so that residential placements could continue; FAPT member dissenting opinions to change service plans; and notes on Individual Family Service Plans stating, "FAPT cannot fund beyond February 28, 2014 per CPMT mandate". The summary of cases supporting this conclusion is as depicted in the following three exhibits:

		MAL CASE REVIEW	
Exhibit C			
	Services Prior to February 2014	Services February 2014 and after	Appeal Decision
Client A	FAPT Meeting dated 12/18/13 FAPT recommended as documented on ARYF CAF Residential services and education were from 1/7/14 -4/30/14	FAPT Meeting dated 2/5/14—The Current placement progress notes stated the client has a continual need to be in a Residential Treatment Facility level of care Parent was advised "FAPT cannot fund beyond February 28, 2014 per CPMT mandate" Thus, Residential services would end February 28, 2014. The provider, case manager and several FAPT members disagreed with discharge planning. Parent was advised of appeal process.	Appeal Hearing held February 14, 2014 and CPMT overturned FAPT's decision to terminate residential services as February 28, 2014. Residential services continued as noted on the ARYF CAF dated 12/18/13
Client B	FAPT Meeting dated 9/11/13 - FAPT recommended as documented on the ARYF CAF Residential services and education were from 9/23/13 -1/31/14	FAPT meeting dated 2/5/14 - Progress notes dated January 2014, states home visits with family were not successful. FAPT recommended as documented on the ARYF CAF -Home base services from 2/5/14 - 4/30/14. Residential services were recommended from 2/1/14 -2/28/14. The family was advised "FAPT cannot fund beyond February 28, 2014 per CPMT mandate." The client, parent, caseworker, several FAPT members and provider objected to a discharge date of February 28, 2014 Parent was advised of the appeal process.	Appeal Hearing held February 14, 2014 and CPMT overturned FAPT's decision to terminate residential services as of February 28, 2014. Service plan changed to reflect approval for residential placement from 2/1/14 -4/30/14.
Client	ARYF CAF Residential services dated 9/25/13, education, medication, and therapy were from 9/23/13 -1/31/14	FAPT meeting dated 2/5/14 - "Provider representative voiced concerns from clinical standpoint and recommended that discharge not take place until March 31, 2014. Provider was asked to scholarship the extra month of education, other fees for residential services to be funded by Medicaid through March 31, 2014" As documented on the ARYF CAF the FAPT recommended Residential services from 2/1/14 -2/28/14 and home based services from 2/5/14 - 5/31/14. Parent was advised "FAPT cannot fund beyond February 28, 2014 per CPMT mandate." Parent was advised of the appeal process.	Not applicable - placement costs absorbed by the provider and county was not billed for services.

#### RESIDENTIAL CASE REVIEW

To exercise due diligence and to determine whether the extent of non-compliance issue, the OCS requested that Prince William County CPMT review all residential cases referenced in the January 2014 memorandum and provide information to OCS regarding resolution of the cases. Prince William County At-Risk Youth and Family Services Office reported on 52 of the 54 residential cases referenced in the January 2014 memorandum. The results of Prince William County At-Risk Youth and Family Services Office 52 cases reviewed are as follows:

#### Exhibit D

Total # of cases in Jan 2014 memo	# of Cases with scheduled FAPT reviews (based on UR schedule or IFSP)	# of Cases with Early FAPT Review Dates	# of Gases with IFSP Changed or Developed based on CPMIT Directive Financial Constraints	# of Appeals as of 3/19/14	# of Appeals where GPMT overruled FAPT's recommendation to discontinue residential services
53	43	10	6	8	7
1	TBD	TBD	TBD	TBD	TBD
54					

Prince William County At-Risk Youth and Family Services Office admitted that FAPT made decisions based on the CPMT directive and not based on the needs of the families and children being served in five cases (the auditor had previously identified two of the five cases). However, they did not include the one case where the service provider gave a scholarship to the family to absorb the cost of placement as mentioned in Exhibit C, resulting in six cases where FAPT made decisions based on CPMT directive. Three out of the six cases that FAPT made decisions based on the CPMT directive child have returned home to their families. In the remaining three cases, one child remains in residential placement, one the family moved to another locality, and one the child was in a detention center, as of August 31, 2014.

The auditor noted one case where FAPT recommended residential services on 1/21/14 for the period of 1/21/14 - 4/30/14, but the client was discharged on 1/30/14 and returned home with no explanation for the discharge. Based on the information provided, there was not a subsequent FAPT meeting.

## **RESIDENTIAL CASE REVIEW**

Prince William County At-Risk Youth and Family Services Office policy states in section titled Residential & Group Homes Placement Consideration that when FAPT decides that a group home is appropriate then the case "will undergo a quarterly review by Prince William County CSA Joint Admissions Review Committee (JARC) to assess compliance with procedures to maximize use of local group home facilities based on needs of the client and capabilities of available services."

While reviewing the data provided by Prince William County At-Risk Youth and Family Services Office, the auditor noted five cases where there was a lapse between the service period end date and the subsequent service planning meeting date to approve continued residential services (where

needed). The FAPT approved services retroactively after substantial services had been rendered to account for the lapse in approval. The table below depicts the lapse in the service approval by FAPT. It is to be noted that the auditor did not point out all examples where there were lapses in approved residential services in the cases reviewed.

#### Exhibit E

	FAPT Date	Residential Service Period	New FAPT Date	New Residential Service Period	Lapse In Residential Service Approval
Client A	8/7/13	8/12/13- 11/30/13	2/5/14	12/1/13 -2/15/14	95 days
Client B	8/13/13	8/13/13 -11/30/13	2/25/14	12/1/13- 1/3/14	115 days
Client C	10/2/13	10/1/13- 1/31/14	2/26/14	2/1/14- 5/31/14	25 days
Client D	9/24/13	10/1/13 -1/31/14	3/18/14	2/1/14 -5/31/14	45 days
Client E	10/1/13	10/1/13-11/30/13	1/15/14	12/1/13 -1/31/14	45 days
Total days					325 days

Since the above cases did not come before FAPT timely, then expenditures for 325 days representing the lapses in approved residential services for five clients are subject to the denial of funds policy.

## RECOMMENDATIONS:

- Prince William County CPMT must provide to the OCS Program Auditor the resolution of the remaining 2 cases mentioned in the January 2014 memorandum and an explanation regarding the case where the client was discharged early with no explanation provided.
- The CPMT should ensure that funds are sufficiently budgeted for the local match for Medicaid services.
- The CPMT should provide written assurance to OCS that going forward service planning and funding authorization decisions will be based on the child and family assessed level of needs evidence by CANS assessments, FAPT reviews, and utilization reviews.
- The CPMT should conduct a review of the all CSA cases during the review period to assess how
  many funded cases had lapses in approvals for residential services. Upon completion of the
  review the CPMT should report results (i.e. the number of cases and associated dollars spent) to
  the auditor for determination of the extent of non compliant practices and identification of
  expenditures that could be subject to denial of funds policies in accordance with COV §2.22648(D)(20).
- The CPMT should re-evaluate its current UR practices to ensure adherence to current policy by case mangers and UM coordinator. The CPMT may want to consider expanding the role of JARC to include an evaluation regarding the effectiveness of service and discharge planning to their residential cases to serve as an additional quality review in their UR process.

<u>Client Comments:</u> "CPMT and DSS management appreciate all observations and accept all recommendations:

- 1. A summary was provided (Exhibit C) which was reviewed by CPMT and confirmed the need for residential services. Service planning development is based on clients' needs taking family situations into consideration. Finalization of services plans and continued case management is done in a comprehensive manner to ensure serving the at-risk youth and family clientele is completed effectively and efficiently. Exhibit C noted three cases and in all circumstances residential services were not ended. ARYFS Office reviewed the cases noted on Exhibit D and reported back to OCS.
- 2. Exhibit C noted three cases and in all circumstances residential services were not ended. ARYFS Office reviewed the cases noted on Exhibit D and reported back to OCS. The matter of 54 cases is based on data prepared for a January CPMT meeting. Based on the status of clients applicable to the data used, the two clients not accepted in our submission were a part of our 54 for the following reasons:
  - a. Client "GK 3374" was at Grafton with a planned discharge, which occurred at the end of January to a TFC.
  - b. Client "MP -7536" was also at Grafton and had transitioned to one of their alternative day placements with residential costs covered by a waiver.
  - c. Our report of 54 accounted for all clients in a residential setting. With the inclusion of the two clients, the first two columns of the table for exhibit D would be revised as follows: from 52 to 54 and from 42 to 44.
- 3. A prohibition of approving services retroactively was immediate. CPMT proposed a draft plan to the state auditor of a process whereby UM Coordinators designed by the CPMT would have the authority to approve funding for services plans finalized by FAPTs."

## **Auditor Note:**

There is one open issues regarding Client GK that referenced in Exhibit D. The information provided to the auditor shows Client GK in treatment foster care placement between 12/15/13 – 4/30/14; however, the CPMT comment states the child was discharged at the end of January. A child cannot have over lapping placements for the same time period. We request that the CPMT provide the auditor with GK's individual service plan, corresponding purchase orders and invoices for the applicable time period documenting residential placement.

The Office of Comprehensive Services respectfully requests that the PWC CPMT submit a corrective action plan to address the observations outlined on pages 2-12 no later than 30 days from receipt of this report. The CPMT may use the template included in the CSA Self-Assessment Workbook. The workbook may be accessed via: http://www.csa.virginia.gov/html/Program Audit/Program Audits information.cfm.

We would like to thank the Prince William County Community Policy and Management Team and related CSA staff for their contributions in completing the CSA Self-Assessment Workbook and for their efforts and cooperation with the expanded scope review of pool fund reimbursement reporting procedures and residential case reviews. Please feel free to contact us should you have any questions.

Sincerely,

Annette E. Larkin MBA
Program Auditor

Stephanie S. Bacote, CIGA Program Audit Manager

cc: Susan C. Clare, OCS Executive Director Melissa S. Peacor, Prince William County Executive Michelle Attreed, CPMT Fiscal Agent Victor L. Evans, CSA Coordinator Charles Salvage, Business Manager